

III. CERTIFICATION LEVEL INFORMATION

A. ENROLLMENT LEVEL

The *Montana Certification Program* has an Enrollment Level for **first time program applicants**. This level requires that first time applicants complete the requirements with the intent of becoming certified within the next three years. The purpose of the enrollment level is to make the process easier for first time applicants and establish a database mailing list for future continuing education opportunities and notices.

1. INSTRUCTIONS TO APPLY FOR ENROLLMENT LEVEL

- Read the entire program manual carefully. The answers to most questions are contained in the program manual.
- Complete the Enrollment Application Form [page 10 or page 35] using the directions on the enrollment form. It should be typed or printed using black ink.
- Original signature is required on the Enrollment Application Form.
- Include payment of \$10.00 for the enrollment fee. This enrollment fee is a processing fee. Make checks payable to the Montana State Library.
- Enrollment Level is valid for three (3) years.
- Enrollment applicant agrees to complete, within the next three (3) years, forty (40) hours of CE contact hour credits.
- Upon completion of the forty (40) hours of CE contact hour credits, within the three (3) year enrollment level period, applicant agrees to complete the appropriate Certification Level Application. (See page 12-18)
- Submit the completed enrollment application form and your enrollment fee to the Montana Certification Program at the address listed at the bottom of this page.
- **It is your responsibility to keep copies of records pertaining to your enrollment level.** These records are valuable for validation purposes, and also as planning tools to identify your learning needs and decide how to meet them.
- **If you have questions that cannot be answered by reading the manual, call or write:**
Montana Certification Program, Montana State Library, PO Box 201800,
Helena MT 59620-1800, 406-444-5349 or 1-800-338-5087 [in MT].

B. ENROLLMENT APPLICATION FORM

Directions:

Complete Enrollment Information (page 10) and Certification Intent section (page 11). This enrollment is valid for three years, after which certification is required. Refer to the contents of the Montana Certification Program Manual for certification level requirements. If you have questions that cannot be answered by reading the program manual, call the Montana Certification Program, MSL, at 406-444-5349 or 1-800-338-5087 [in MT].

Include a \$10.00 enrollment fee. Make checks payable to MONTANA STATE LIBRARY.

Submit completed enrollment application form to: MONTANA CERTIFICATION PROGRAM, MONTANA STATE LIBRARY, PO BOX 201800, HELENA MT 59620-1800.

ENROLLMENT INFORMATION
NAME: (last) (first) (middle initial)
MAILING ADDRESS [home]: (address) (city) (state) (zip)
CURRENT EMPLOYMENT: (institution name)
MAILING ADDRESS [employment]: (address) (city) (state) (zip)
CURRENT EMPLOYMENT POSITION:
TELEPHONE NUMBERS: (home) (employment)
E-MAIL ADDRESS:

⌘⌘ CERTIFICATION INTENT SECTION ⌘⌘

APPLICANT NAME:

ENROLLMENT LEVEL REQUIREMENTS:

Complete Enrollment Level Application.

Include \$10.00 Enrollment Fee.

Enrollment Level is valid for three (3) years.

Enrollment applicant agrees to complete, within the next three (3) years, forty (40) hours of CE contact hour credits.

Upon completion of the forty (40) hours of CE contact hour credits, within the three (3) year enrollment level period, applicant agrees to complete the appropriate Certification Level Application. (See pages 12-18)

CERTIFICATION LEVEL INTENTMENT:

I am working towards Certification Level: I II III IV V (please circle one)

CERTIFICATION LEVEL:

I hereby certify that the preceding information is true and correct to the best of my knowledge. I agree to follow the requirements needed for enrollment and certification in the Montana Certification Program. I understand that any false statements may result in denial or revocation of my Montana Certification Program Certificate.

ENROLLMENT APPLICANT SIGNATURE:

DATE SIGNED:

NOTE:

After receiving this enrollment application form, you will receive a letter from the Montana State Library accepting your application and certification intent.

SEND ENROLLMENT APPLICATION TO: MONTANA CERTIFICATION PROGRAM, MONTANA

C. HOW TO APPLY FOR CERTIFICATION LEVEL I THROUGH V

To become certified, follow the instructions below. The procedures for certification also apply to individuals upgrading to a higher level of certification. You can upgrade at any time you meet the requirements for the next level. Certificates are valid for five years.

1. INSTRUCTIONS

- Read this entire program manual carefully. The answers to most questions are contained in the program manual. Complete the Application Form for Certification Levels I through V on page 13 using the directions on the form and then complete the application form for the appropriate level of certification that you are applying for. It should be typed or printed using black ink. Photocopies are acceptable. **You need only photocopy the requested level of certification.** This is true of the other forms as well. Extra copies of the forms are located in the appendix starting on page 37.
- If it is required for your certification level, send an official transcript to the Montana Certification Program, Montana State Library, PO Box 201800, Helena MT 59620-1800.
- If it is required for your certification level, attach copies of your CE Program With Prior Approval Forms and the CE Program Without Prior Approval Forms. (See pages 26-28).
- Include payment of \$10.00 certification fee. This certification fee is a processing fee. Make checks payable to the MONTANA STATE LIBRARY. **IF YOU ARE A FIRST TIME PROGRAM APPLICANT AND PAID THE ENROLLMENT FEE, YOU DO NOT HAVE TO PAY THE CERTIFICATION FEE.**
- Submit the completed application form, required materials, and your certification fee to the Montana Certification Program at the address listed at the bottom of this page.
- **It is your responsibility to keep copies of records pertaining to your certification.** These records are valuable for validation purposes, and also as planning tools to identify your learning needs and decide how to meet them.
- **Lifetime Certificates Will Not Be Issued At Any Certification Level.**
- **If you have questions that cannot be answered by reading the manual, call or write:**

**MONTANA CERTIFICATION PROGRAM
MONTANA STATE LIBRARY
PO BOX 201800
HELENA MT 59620-1800
406-444-5349 or 1-800-338-5087 [in MT]**

D. APPLICATION FORM FOR CERTIFICATION LEVELS I THROUGH V

Directions: Complete General Information and Certification section which pertains to the Level for which you are applying for certification or upgrading your certification level. Refer to the contents of the Montana Certification Program Manual for certification level requirements. **If you have questions that cannot be answered by reading the program manual, call the Montana Certification Program, MSL, at 406-444-5349 or 1-800-338-5087 [in MT].**

Attach an extra sheet if necessary. Include a payment of \$10.00 for the certification fee. Make checks payable to MONTANA STATE LIBRARY. Send a copy of an official transcript to the address below, if required. Attach copies of CE Program With Prior Approval Forms and the CE Program Without Prior Approval Forms, if required.

Submit completed form and attachments to: MONTANA CERTIFICATION PROGRAM, MONTANA STATE LIBRARY, PO BOX 201800, HELENA MT 59620-1800.

GENERAL INFORMATION
NAME: (last) (first) (middle initial)
MAILING ADDRESS [home]: (address) (city) (state) (zip)
CURRENT EMPLOYMENT: (institution name)
MAILING ADDRESS [employment]: (address) (city) (state) (zip)
CURRENT EMPLOYMENT POSITION:
TELEPHONE NUMBERS: (home) (employment)
E-MAIL ADDRESS:

CERTIFICATION LEVEL REQUESTED: I II III IV V (circle one)
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E. APPLICATION FORM FOR CERTIFICATION LEVEL I

Copies of each of the Certification Level Applications are located in the appendix starting on page 37. Please photocopy the requested Certification Level Application and provide the needed information to the Montana Certification Program.

LEVEL I -- GRADUATE DEGREE IN LIBRARY OR INFORMATION SCIENCE FROM AN INSTITUTION OF HIGHER EDUCATION ACCREDITED BY THE AMERICAN LIBRARY ASSOCIATION:
Name of Institution * :
Dates Attended:

*** AN OFFICIAL TRANSCRIPT SENT TO THE MONTANA CERTIFICATION PROGRAM IS REQUIRED.**

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN DENIAL OR REVOCATION OF THE CERTIFICATE.

APPLICANT SIGNATURE

DATE SIGNED

NOTE: CERTIFICATES ARE VALID FOR FIVE YEARS.

F. APPLICATION FORM FOR CERTIFICATION LEVEL II

Copies of each of the Certification Level Applications are located in the appendix starting on page 37. Please photocopy the requested Certification Level Application and provide the needed information to the Montana Certification Program.

LEVEL II --		
<input type="checkbox"/> BACHELOR'S DEGREE FROM AN ACCREDITED COLLEGE OR UNIVERSITY *, AND -- 15 Semester Hours Or 20 Quarter Hours In Library Education From An Accredited College Or University *, AND -- 40 CE Contact Hours **		
OR		
<input type="checkbox"/> MINIMUM OF A MINOR IN LIBRARY SCIENCE FROM AN ACCREDITED COLLEGE OR UNIVERSITY *, AND -- 40 CE Contact Hours **		
NAME OF INSTITUTIONS *:		
DATES ATTENDED:		
40 CE CONTACT HOUR CREDITS: REQUIRES AT LEAST FIVE (5) HOURS IN EACH OF THE FIRST FOUR CONTINUING EDUCATION AREAS.		
Continuing Education Areas **	With Prior Approval	Without Prior Approval
Library Administration		
Library Services to the Public		
Collection Management & Technical Services		
Technology		
Other		
TOTAL CONTACT HOURS		

* AN OFFICIAL TRANSCRIPT SENT TO THE MONTANA CERTIFICATION PROGRAM IS REQUIRED.

** ATTACH THE CE PROGRAM WITH PRIOR APPROVAL FORMS AND THE CE PROGRAM WITHOUT PRIOR APPROVAL FORMS. INCLUDE EITHER A CERTIFICATE OF ATTENDANCE FOR THE ACTIVITY OR THE INSTRUCTOR'S SIGNATURE ON THESE FORMS.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN DENIAL OR REVOCATION OF THE CERTIFICATE.

APPLICANT SIGNATURE

DATE SIGNED

G. APPLICATION FORM FOR CERTIFICATION LEVEL III

Copies of each of the Certification Level Applications are located in the appendix starting on page 37. Please photocopy the requested Certification Level Application and provide the needed information to the Montana Certification Program.

LEVEL III --		
<input type="checkbox"/> BACHELOR'S DEGREE FROM AN ACCREDITED COLLEGE OR UNIVERSITY *, AND -- 40 CE Contact Hours **		
OR		
<input type="checkbox"/> ASSOCIATED DEGREE FROM AN ACCREDITED COLLEGE OR UNIVERSITY *, AND -- 5 Years Library Work Within The Last 10 Years, AND -- 40 CE Contact Hours **		
NAME OF INSTITUTION *:		
DATES ATTENDED:		
NAME OF EMPLOYER:		
DATES EMPLOYED:		
40 CE CONTACT HOUR CREDITS: REQUIRES AT LEAST FIVE (5) HOURS IN EACH OF THE FIRST FOUR CONTINUING EDUCATION AREAS.		
Continuing Education Areas **	With Prior Approval	Without Prior Approval
Library Administration		
Library Services to the Public		
Collection Management & Technical Services		
Technology		
Other		
TOTAL CONTACT HOURS		

* AN OFFICIAL TRANSCRIPT SENT TO THE MONTANA CERTIFICATION PROGRAM IS REQUIRED.

** ATTACH THE CE PROGRAM WITH PRIOR APPROVAL FORMS AND THE CE PROGRAM WITHOUT PRIOR APPROVAL FORMS. INCLUDE EITHER A CERTIFICATE OF ATTENDANCE FOR THE ACTIVITY OR THE INSTRUCTOR'S SIGNATURE ON THESE FORMS.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN DENIAL OR REVOCATION OF THE CERTIFICATE.

APPLICANT SIGNATURE

DATE SIGNED

NOTE: CERTIFICATES ARE VALID FOR FIVE YEARS.

H. APPLICATION FORM FOR CERTIFICATION LEVEL IV

Copies of each of the Certification Level Applications are located in the appendix starting on page 37. Please photocopy the requested Certification Level Application and provide the needed information to the Montana Certification Program.

LEVEL IV --		
<input type="checkbox"/> High School Diploma or G.E.D., AND -- 60 Semester Hours or 90 Quarter Hours of College Credit **, AND -- 40 CE Contact Hours **		
OR		
<input type="checkbox"/> High School Diploma or G.E.D., AND -- 5 Years of Library Work Within The Last 10 Years, AND -- 40 CE Contact Hours **		
NAME OF INSTITUTIONS *:		
DATES ATTENDED:		
NAME OF EMPLOYER:		
DATES EMPLOYED:		
40 CE CONTACT HOUR CREDITS: REQUIRES AT LEAST FIVE (5) HOURS IN EACH OF THE FIRST FOUR CONTINUING EDUCATION AREAS.		
Continuing Education Areas **	With Prior Approval	Without Prior Approval
Library Administration		
Library Services to the Public		
Collection Management & Technical Services		
Technology		
Other		
TOTAL CONTACT HOURS		

* AN OFFICIAL TRANSCRIPT SENT TO THE MONTANA CERTIFICATION PROGRAM IS REQUIRED.

** ATTACH THE CE PROGRAM WITH PRIOR APPROVAL FORMS AND THE CE PROGRAM WITHOUT PRIOR APPROVAL FORMS. INCLUDE EITHER A CERTIFICATE OF ATTENDANCE FOR THE ACTIVITY OR THE INSTRUCTOR'S SIGNATURE ON THESE FORMS.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN DENIAL OR REVOCATION OF THE CERTIFICATE.

APPLICANT SIGNATURE

DATE SIGNED

NOTE: CERTIFICATES ARE VALID FOR FIVE YEARS.

I. APPLICATION FORM FOR CERTIFICATION LEVEL V

Copies of each of the Certification Level Applications are located in the appendix starting on page 37. Please photocopy the requested Certification Level Application and provide the needed information to the Montana Certification Program.

LEVEL V --		
<input type="checkbox"/> High School Diploma or G.E.D., AND -- 2 Years of Library Work Within The Last 5 Years, AND -- 40 CE Contact Hours *		
NAME OF INSTITUTION:		
DATES ATTENDED:		
NAME OF EMPLOYER:		
DATES EMPLOYED:		
40 CE CONTACT HOUR CREDITS: REQUIRES AT LEAST FIVE (5) HOURS IN EACH OF THE FIRST FOUR CONTINUING EDUCATION AREAS.		
Continuing Education Areas **	With Prior Approval	Without Prior Approval
Library Administration		
Library Services to the Public		
Collection Management & Technical Services		
Technology		
Other		
TOTAL CONTACT HOURS		

* ATTACH THE CE PROGRAM WITH PRIOR APPROVAL FORMS AND THE CE PROGRAM WITHOUT PRIOR APPROVAL FORMS. INCLUDE EITHER A CERTIFICATE OF ATTENDANCE FOR THE ACTIVITY OR THE INSTRUCTOR'S SIGNATURE ON THESE FORMS.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY RESULT IN DENIAL OR REVOCATION OF THE CERTIFICATE.

APPLICANT SIGNATURE

DATE SIGNED

NOTE: CERTIFICATES ARE VALID FOR FIVE YEARS.